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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois | |
| (State) | Chapter you are filing under: |
| · · · · · · · · · · · · · · · · · · · | ✓ Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | _James First name | First name |
| | Write the name that is on your government-issued picture identification (for example, your driver's | R Middle name Lucht | Middle name |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | James | |
| | have used in the last | First name | First name |
| | 8 years | Middlerses | Middlerane |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Lucht, Jr. Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 4131 | |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| D | ebtor 1 James First Name | H Lucht Middle Name Last Name | Case number (if known) |
|----|---|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last 8 years | Business name | Business name |
| | | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 1107 Cardinal Dr Number Street | Number Street |
| | | Zion Illinois 60099 | |
| | | City State Zip Code | City State Zip Code |
| | | Lake County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 James | R | Lucht | Case number (if know | <u></u> |
|---|---|---|---|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Ab | oout Your Bankruptcy Ca | ase | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and | | |
| 8. How you will pay the fee | more details about cashier's check, or may pay with a cred I need to pay the findividuals to Pay I request that my finding may, but is not the official poverty you choose this open. | how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-print fee in installments. If you choose Your Filing Fee in Installments (Coffee be waived (You may request not required to, waive your fee, and line that applies to your family significant or the state of | ou are paying the submitting your ed address. e this option, sign official Form 103A this option only independent of the pay do so only ize and you are un | |
| 9. Have you filed for bankruptcy within the last 8 years? | Yes. District District District | When When When | MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to | ord obtained an eviction judgment a b line 12. ut <i>Initial Statement About an Eviction</i> ankruptcy petition. | | |

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R Lucht Debtor 1 James Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 James
 R
 Lucht
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 James First Name | | icht Case nu | Imber (if known) |
|---|---|---|--|
| | estions for Reporting Purposes | st maile | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily of "incurred by an individual property No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily by | orimarily for a personal, family business debts? Business de vestment or through the oper | bts are debts that you incurred to obtain ation of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that full No. | | exempt property is excluded and administrative to unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | □ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 m \$100,000,001-\$100 m | ### ################################## |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 mil \$100,000,001-\$500 | ### ################################## |
| Part 7: Sign Below | I have aversioned this matition are | d I do alovo v vo dov o ovo altre of vo | |
| For you | correct. If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance with | apter 7, I am aware that I may understand the relief availabl I did not pay or agree to pay ed and read the notice require h the chapter of title 11, Unite | proceed, if eligible, under Chapter 7, 11,12, or 13 e under each chapter, and I choose to proceed someone who is not an attorney to help me fill ed by 11 U.S.C. § 342(b). ed States Code, specified in this petition. r obtaining money or property by fraud in |
| | connection with a bankruptcy ca both. 18 U.S.C. §§ 152, 1341, 15 | se can result in fines up to \$2519, and 3571. | 250,000, or imprisonment for up to 20 years, or |
| | /s/ James Lucht Signature of Debtor 1 | × | Signature of Debtor 2 |
| | Executed on 3/22/2017 MM / DD / | | Executed on |

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| Debtor 1 James | R | Lucht | Case number (if I | known) |
|--|----------------------------|----------------------|------------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 1 | 2, or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | . , | , , | | ules filed with the petition is incorrect. |
| attorney, you do not | • | , , | | • |
| need to file this page. | /s/ Nathan Delman | | Date | 3/22/2017 |
| | Signature of Attorney f | or Debtor | | M / DD / YYYY |
| | | | | |
| | | | | |
| | Nathan Delman | | | |
| | Printed name | | | |
| | Command Laws Firms | | | |
| | Semrad Law Firm Firm name | | | |
| | | | | |
| | 5101 Washington Stre | eet | | |
| | Street | | | |
| | Unit 29 | | | |
| | | | | |
| | Gurnee | | Illinois | 60031 |
| | City | | State | Zip Code |
| | O and and advance | 0404470700 | | |
| | Contact phone | 3124473700 | Email address | ndelman@semradlaw.com |
| | | | | |
| | 6296205 | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|--|--|
| Debtor 1 | James | R | Lucht | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | | | |
| | | | (State) | | | | | | |
| Case number (If known) | | | | | | | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | | Your assets |
|--|---|---|
| 1a. Copy line 55, Total real estate, from Schedule A/B | | Value of what you own |
| 1b. Copy line 62, Total personal property, from Schedule A/B | hedule A/B: Property (Official Form 106A/B) | \$60,166.50 |
| 1c. Copy line 63, Total of all property on Schedule A/B | . Copy line 55, Total real estate, from Schedule A/B | Ψ00,100.50 |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | copy line 62, Total personal property, from Schedule A/B | \$21,680.00 |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Copy line 63, Total of all property on Schedule A/B | \$81,846.50 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | : Summarize Your Liabilities | |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | | Your liabilities Amount you owe |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | hedula D: Creditors Who Have Claims Secured by Property (Official Form 106D) | , |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | | \$106,197.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | hedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| Your total liabilities | . Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| | . Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$46,739.05 |
| rt 3: Summarize Your Income and Expenses | Your total liabilities | \$152,936.05 |
| Cummanizo Four Moomo and Exponess | Summarize Your Income and Expenses | |
| | · | |
| Schedule I: Your Income (Official Form 106I) | · · · · · · · · · · · · · · · · · · · | \$6,572.33 |
| Copy your combined monthly income from line 12 of Schedule I | pp your combined monthly income from line 12 of Schedule I | |
| Schedule J: Your Expenses (Official Form 106J) | | \$6,561.00 |

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| Deb | otor 1 James First Name | R Middle Name | Lucht Last Name | Case number (if known) | | | | | | |
|-------------|--|--|--|---|----------|--|--|--|--|--|
| Part | | uestions for Administrat | | ords | | | | | | |
| [| | tcy under Chapters 7, 11, o to report on this part of the fo | | mit this form to the court with your other sc | hedules. | | | | | |
| 7. v | 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | |
| | 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$7,430.30 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | | | | | |
| 9. | Copy the following spec | cial categories of claims fro | m Part 4, line 6 of Schedu | le E/F: | | | | | | |
| | From Part 4 on Schedu | le E/F, copy the following: | | Total claim | | | | | | |
| | 9a. Domestic support ob | ligations (Copy line 6a.) | | \$0.00 | | | | | | |
| | 9b. Taxes and certain oth | er debts you owe the governi | ment. (Copy line 6b.) | \$0.00 | | | | | | |
| | 9c. Claims for death or pe | ersonal injury while you were i | ntoxicated. (Copy line 6c.) | \$0.00 | | | | | | |
| | 9d. Student loans. (Copy | line 6f.) | 1(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Its. You have nothing to report on this part of the form. Check this box and submit is. Income: Copy your total current monthly income from Official S7,430.30 PR, Form 122C-1 Line 14. Ins from Part 4, line 6 of Schedule E/F: Ing: Total claim \$0.00 Sovernment. (Copy line 6b.) | | | | | | | |
| | 9e. Obligations arising ou priority claims. (Copy line | | or divorce that you did not rep | port as \$0.00 | | | | | | |
| | 9f. Debts to pension or p | rofit-sharing plans, and other | similar debts. (Copy line 6h.) | | | | | | | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | inform | nation to identify your ca | ase: | | | | | | |
|--|------------------------------|--|--|--------------|---|---|----------------------|--|--|
| Debtor 1 | | James | R | | Lucht | | | | |
| 200101 1 | | First Name | Middle Na | ame | Last Name | | | | |
| Debtor 2 (Spouse, if fi | ling) | First Name | Middle Na | ame | Last Name | | | | |
| United Sta | ates Ba | ankruptcy Court for the: | Northern | | District of Illinois | | | | |
| Case num | nber | | | | (State) | | | | |
| Officia | al Fo | orm 106A/B | | | | | | | Check if this is an amended filing |
| Sche | dule | A/B: Prope | rty | | | | | | 12/1 |
| category v responsibl write your | where le for s name | y, separately list and d you think it fits best. B supplying correct inforr and case number (if k ribe Each Residenc | e as complete ar mation. If more sp nown). Answer ev | d ace ery | curate as possible. It is needed, attach a s question. | two married peopl separate sheet to th | le are f his forn | iling together, both a n. On the top of any a | re equally |
| 1. Do you | | or have any legal or eq | uitable interest i | n an | residence, building, | land, or similar pro | operty? | | |
| | | No to Part 2 Where is the property? | | | | | | | |
| 1.1 | Street | address, if available, or o | other description | | at is the property? Ch Single-family home Duplex or multi-unit bu | | tł | ne amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. |
| | Numb | Cardinal Dr per Street | | | Condominium or coop Manufactured or mobil | perative | е | current value of the ntire property? | Current value of the portion you own? \$60166.50 |
| | Zion City Lake Coun | Illinois State | Zip Code | | Land Investment property Timeshare Other | | iı | Describe the nature on terest (such as fee she entireties, or a life | simple, tenancy by |
| | | • | | Wh | has an interest in the | ne property? Check | - Г | Check if this is co | mmunity property |
| | | | | one | | .,.,., | | , | |
| | | | | П | Debtor 2 only | | | | |
| | | | | | Debtor 1 and Debtor 2 | only | | | |
| | | | | ✓ | At least one of the deb | | | | |
| | | | | pro | er information you w perty identification aber: | ish to add about thi | is item | , such as local | |
| If you | own o | r have more than one, lis | st here: | | | | | | |
| 1.2 | Street | address, if available, or o | other description | What | at is the property? Ch Single-family home | , | tł | ne amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> hims Secured by Property. |
| | | | | | Duplex or multi-unit bu Condominium or coop Manufactured or mobil | perative | | Current value of the ntire property? | Current value of the portion you own? |
| | Numb | per Street | | | Land Investment property | | | Describe the nature on terest (such as fee s | |
| | City | State | Zip Code | H | Timeshare Other | | t | he entireties, or a life | e estate), if known. |
| | | | | Who one | has an interest in th | ne property? Check | | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 1 only | | L | _ | |
| | | | | | Debtor 2 only | | | | |
| | | | | | Debtor 1 and Debtor 2 | • | | | |
| | | | | | At least one of the deb | tors and another | | | |
| | | | | | er information you wi | | is item | , such as local | |

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| Debtor 1 | James First Name | R Middle Name | Lucht Case number | er (if known) | |
|-------------------------------|--|--|---|---|--|
| 1.3 | et address, if available, or ot | \ | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any se | d claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property. Current value of the portion you own? |
| Nun | nber Street State | Zip Code | Land Investment property Timeshare Other The book interest in the property Check one | Check if this is | simple, tenancy by ife estate), if known. community property |
| | | [[[| Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item property identification number: | (see instructions | 5) |
| | the dollar value of the po ve attached for Part 1. W | | all of your entries from Part 1, including any entrie ere. | es for pages \$6 | 60166.50 |
| Do you ow you own t | hat someone else drives. If yours, trucks, tractors, sport u | equitable interest you lease a vehicle, | t in any vehicles, whether they are registered or n also report it on Schedule G: Executory Contracts and cycles | | S |
| Yes | | Kia Optima 2016 | Who has an interest in the property? Check one. Debtor 1 only | the amount of any se | ed claims or exemptions. Put ecured claims on <i>Schedule D:</i> Claims Secured by Property. |
| | Approximate mileage: Other information: | 4000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? \$18200.00 | Current value of the portion you own? |
| 3.2 | Make Model: Year: | <u> </u> | Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | the amount of any se | ed claims or exemptions. Put ecured claims on <i>Schedule D:</i> Claims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Current value of the entire property? | e Current value of the portion you own? |

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| Middle Name Last Name | |
|--|---|
| Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| At least one of the debtors and another Check if this is community property (see instructions) | |
| Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D Creditors Who Have Claims Secured by Property.</i> Current value of the Current value of the |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | entire property? portion you own? |
| ATVs and other recreational vehicles, other vehicles, and ac | |
| sonal watercraft, fishing vessels, snowmobiles, motorcycle accesso | ories |
| Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only | |
| Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property. Current value of the Current value of the |
| Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property. Current value of the Current value of the |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) |

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Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$700.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... x4 televisions; x1 Ipad; x1 laptop; x1 desktop \$550.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1500.00 for Part 3. Write that number here

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Lucht

Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: First Midwest Bank \$1000.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: First Midwest Bank \$980.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb | tor 1 James | R | Lucht | Case number (if known) | |
|-----|--|--|----------------------------|--|--------|
| 20. | | Middle Name orate bonds and other negotial | | | |
| | | include personal checks, cashiers ents are those you cannot transfe | | | |
| | No Yes. Give specific information about | Issuer name: | , , | | |
| | them | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in IF | |), thrift savings account | ts, or other pension or profit-sharing plans | |
| | No | Type of account: | Institution name: | | |
| | ✓ Yes. List each account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | Milweyles Frankeys | Detives and Contains | \$0.00 |
| | | IRA: | Milwaukee Employee | netirement system | φ0.00 |
| | | Retirement account: | | | - |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22 | Socurity deposite and | | | | - |
| 22. | | I deposits you have made so that with landlords, prepaid rent, publi | | | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | - | | |
| | | Gas: | | | _ |
| | | Heating oil: | | | _ |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or fo | or a number of years) | - |
| | ✓ No | Issuer name and description: | | | |
| | Yes | iocaci namo and description. | | | |
| | | | | | |
| | | - | | | |
| | | | | | |

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| Debt | or 1 James | R Middle Na | Lucht Last Name | Case number (if known) | |
|------|--|--|---|--|---|
| 0.4 | First Name | | unt in a qualified ABLE program, or un | | |
| 24. | 26 U.S.C. §§ | | | | |
| | ✓ No | Institution name and descripti | ion. Separately file the records of any inter | rests.11 U.S.C. § 521(c): | |
| | Yes | · | | • ,, | |
| | | | | | |
| | | | | | |
| 25. | | ble or future interests in propriet | operty (other than anything listed in li | ne 1), and rights or powers | |
| | ✓ No | | | | |
| | Yes. Desc | ribe | | | |
| 0.6 | Dotonto con | | annete and other intellectual presents | | |
| 26. | - | | ecrets, and other intellectual property , proceeds from royalties and licensing ag | | |
| | ✓ No | مان | | | |
| | Yes. Desc | ilbe | | | |
| 27. | | nchises, and other general in | | | |
| | | lding permits, exclusive license | es, cooperative association holdings, liquo | or licenses, professional licenses | |
| | ✓ No Yes. Desc | ribe | | | |
| | ш | | | | |
| | | | | | |
| Mar | ov or propor | ty awad to you? | | | Current value of the |
| Mor | ney or propei | ty owed to you? | | | Current value of the portion you own? |
| Mor | ney or propei | ty owed to you? | | | |
| | ney or propei | | | | portion you own? Do not deduct secured |
| | Tax refunds o | ved to you | | Endarel | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or ✓ No — Yes. Give sabou | ved to you pecific information t them, including whether | | Federal: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| | Tax refunds or No Yes. Give s about | ved to you pecific information | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give s about you a and f | pecific information t them, including whether lready filed the returns he tax years | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give sabout you a and the Family support Examples: Past | pecific information t them, including whether llready filed the returns he tax years | pousal support, child support, maintenanc | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past | pecific information t them, including whether lready filed the returns he tax years t due or lump sum alimony, sp | pousal support, child support, maintenanc | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past | pecific information t them, including whether llready filed the returns he tax years | pousal support, child support, maintenanc | State: Local: ce, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past | pecific information t them, including whether lready filed the returns he tax years t due or lump sum alimony, sp | pousal support, child support, maintenanc | State: Local: ce, divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past | pecific information t them, including whether lready filed the returns he tax years t due or lump sum alimony, sp | pousal support, child support, maintenanc | State: Local: ce, divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past | pecific information t them, including whether lready filed the returns he tax years t due or lump sum alimony, sp | oousal support, child support, maintenanc | State: Local: De, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give s about you a and to Family suppor Examples: Past ✓ No Yes. Give s Other amount | pecific information t them, including whether llready filed the returns he tax years t due or lump sum alimony, sp | | State: Local: Dee, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No ✓ Yes. Give s about you a and to Family support Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp | pecific information t them, including whether llready filed the returns he tax years t due or lump sum alimony, sp specific information | pousal support, child support, maintenance e payments, disability benefits, sick pay, va ans you made to someone else | State: Local: Dee, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on ✓ No ✓ Yes. Give s about you a and if Family suppor Examples: Past ✓ No ✓ Yes. Give s Other amount Examples: Unp Soc | pecific information t them, including whether dready filed the returns he tax years t due or lump sum alimony, sp specific information | e payments, disability benefits, sick pay, va | State: Local: Dee, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | pecific information t them, including whether dready filed the returns he tax years t due or lump sum alimony, sp specific information | e payments, disability benefits, sick pay, va | State: Local: Dee, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 James | R | Lucht | Case number (if known) | _ |
|------|--|--|--------------------------------|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disab | | avings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insure of each policy and | ırance company | npany name: | Beneficiary: | Surrender or refund value: |
| 32. | | | | cy, or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | | parties, whether or not you he mployment disputes, insurance | | e a demand for payment | |
| 34. | Other contingent and to set off claims | unliquidated claims of ever | y nature, including counter | claims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets y | ou did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | of all of your entries from Pa number here | | or pages you have attached | \$1980.00 |
| Part | 5: Describe Any B | usiness-Related Proper | ty You Own or Have an I | nterest In. List any real estate in Part | 1. |
| 37. | Do you own or have a | ny legal or equitable interes | st in any business-related p | roperty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | pc Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | | or commissions you already | earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furn Examples: Business-rel | | dems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, electro | onic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 James | R | Lucht | Case number (if known) | |
|----------|-------------------------|---------------------------------|-----------------------------------|------------------------------------|--|
| | First Name | Middle Name | Last Name | | |
| 40. | Machinery, fixtures, e | equipment, supplies you | use in business, and tools of y | our trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 44 | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 12 | Interests in partnersh | nine or joint ventures | | | |
| 42. | | iips or joint ventures | | | |
| | ✓ No | | Name of entity: | % of ownership: | |
| | Yes. Give specific | | ramo or oracy. | % of ownorms. | |
| | information about them | | | | |
| | urom | | | | |
| | | | | · · | |
| 12 | Customor lists, mailing | ı lists, or other compilat | ione | | |
| 45. | | insts, or other compilar | .10115 | | |
| | ✓ No | | | | |
| | Yes. Do your lists i | nclude personally identifia | ble information (as defined in 11 | U.S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| 44. | Any business-related | property you did not all | eady list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | _ |
| | information | | | | |
| | | | | | |
| | | | - | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Part 5, including any entries fo | | |
| • | | | | | |
| Part | | | | ty You Own or Have an Interest In. | |
| | If you own or have ar | n interest in farmland, list it | in Part 1. | | |
| 46. | Do you own or have a | ny legal or equitable in | terest in any farm- or commer | cial fishing-related property? | |
| | No. Go to Part 7. | | | | Current value of the |
| | Yes. Go to line 47. | _ | | | portion you own? Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | √ No | | | | |
| | Yes. Describe | | | | |
| | ш | | | | |
| | - | | | | |

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| Debt | tor 1 James First Name | | Lucht (| Case number (if known) | |
|--------------|----------------------------|---|-------------------------|------------------------------|--------------|
| 48. | Crops-either growing | or harvested | | | |
| | No Yes. Describe | | | | |
| 49. | Farm and fishing equi | pment, implements, machinery, fixtur | es, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing supp | olies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 51. | Any farm- and comme | ercial fishing-related property you did | not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | III of your entries from Part 6, includin | | ı have attached | |
| • | | | | L | |
| Part | 7: Describe All Pro | operty You Own or Have an Intere | est in That You Did Not | List Above | |
| | Do you have other pro | perty of any kind you did not already | | | |
| | | ts, country club membership | | | |
| | ✓ No Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| 54. A | dd the dollar value of a | ıll of your entries from Part 7. Write th | at number here | | • |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | 8: List the Totals o | f Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | e, line 2 | | | \$60166.50 |
| 56. r | oart 2 total vehicles, lir | ne 5 | \$18200.00 | | |
| 57. P | art 3: Total personal a | nd household items, line 15 | \$1500.00 | | |
| 58. P | art 4: Total financial a | ssets, line 36 | \$1980.00 | | |
| 59. F | Part 5: Total business-r | related property, line 45 | | | |
| 60. F | Part 6: Total farm- and | fishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | perty not listed, line 54 | | | |
| 62.1 | Total personal property | . Add lines 56 through 61 | \$21680.00 | Copy personal property total | + \$21680.00 |
| | | | <u> </u> | | \$81846.50 |
| 63. T | otal of all property on | Schedule A/B. Add line 55 + line 62 | | | ψυ 1040.00 |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | James | R | Lucht | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (State) | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Ра | Identify the Property You Clair | n as Exempt | | | | | | |
|--|---|---|---|--|--|--|--|--|
| 1. | | • | | | | | | |
| You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | | |
| | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: 1107 Cardinal Dr, Zion, IL 60099 Line from | \$60,166.50 | \$12,321.50 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-901 | | | | |
| | Schedule A/B: 01 Brief description: Kia Optima, 2016 Line from Schedule A/B: 03 | \$18,200.00 | \$2,400.00; \$770.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | | | |

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R Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$1,000.00 description: **✓** \$1,000.00 Checking account, First 100% of fair market value, up to any Midwest Bank applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$980.00 description: **V** \$980.00 Savings account, First 100% of fair market value, up to any Midwest Bank applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief description: \$700.00 **✓** \$700.00 **Used Furniture** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(a) Brief \$250.00 description: \$250.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$550.00 description: **✓** \$550.00 x4 televisions; x1 lpad; 100% of fair market value, up to any x1 laptop; x1 desktop applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1006 Brief \$0.00 description: **✓** \$0 Pension plan, 100% of fair market value, up to any Milwaukee Employee applicable statutory limit Retirement System

Line from Schedule A/B:

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| Fill in | this information to identify your ca | se: | | | | |
|------------------|---|--|--|--|--|--------------------------------------|
| Debto | or 1 James | R | Lucht | | | |
| Debio | First Name | Middle Name | Last Name | | | |
| Debto | or 2 | | | | | |
| (Spous | e, if filing) First Name | Middle Name | Last Name | | | |
| United | d States Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case (If know | number | | (State) | | | |
| Offi | icial Form 106D | | | l | | Check if this is a amended filing |
| Scl | nedule D: Credito | ors Who Ha | ve Claims Secure | ed by Prop | erty | 12/1 |
| more s | • | | e are filing together, both are equa nber the entries, and attach it to t | • | | |
| 1. [| Do any creditors have claims se | ecured by your proper | tv? | | | |
| Г | - | | vith your other schedules. You hav | e nothing else to rep | ort on this form. | |
| [| Yes. Fill in all of the information | | , | - · · · · · · · · · · · · · · · · · · · | | |
| Part ' | 1: List All Secured Claims | | | | | |
| 2. | List all secured claims. If a credit | | | Column A | Column B | Column C |
| | separately for each claim. If more the in Part 2. As much as possible, list name. | · | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | PLANET HOME LENDING, L | Describe the property | that secures the claim: | \$95,690.00 | \$120,333.00 | \$0.00 |
| | Creditor's Name 321 Research Pkwy | | IL 60099 Value: \$0.00 | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | #303 | Contingent | | | | |
| | Meriden CT 06450 | Unliquidated | | | | |
| | City State ZIP Code Who owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Nature of lien. Check a | all that apply. | | | |
| | Debtor 2 only | An agreement you | made (such as mortgage or secured | | | |
| | Debtor 1 and Debtor 2 only | car loan) | 3.3. | | | |
| | At least one of the debtors | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | and another | Judgment lien from | a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a ri | ght to offset) | | | |
| | Date debt was incurred | Last 4 digits of accou | nt number0438 | | | |
| 2.2 | KIA MOTORS FINANCE | Describe the property | that secures the claim: | \$10,507.00 | \$18,200.00 | \$0.00 |
| | Creditor's Name PO BOX 20815 | Kia Optium Value: \$0.0 | | | | |
| | Number Street | | , the claim is: Check all that apply. | | | |
| | | Contingent | | | | |
| | FOUNTAIN | Unliquidated | | | | |
| | VALLEY CA 92728 City State ZIP Code | Disputed | | | | |
| | Who owes the debt? Check one. | Nature of lien. Check a | all that apply. | | | |
| | Debtor 1 only | An agreement you r | made (such as mortgage or secured | | | |
| | Debtor 2 only | car loan) | 3.3. | | | |
| | Debtor 1 and Debtor 2 only | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | At least one of the debtors and another | Judgment lien from Other (including a ri | | | | |
| | Check if this claim relates | | | | | |
| | to a community debt Date debt was incurred | Last 4 digits of accou | nt number7396 | | | |
| | | your entries in Column A | on this page. Write that number | \$106,197.00 | | |
| | _ | | | | | |

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| Fill in | this inforr | nation to identify your c | ase: | | | |
|--|--|--|---|--|---|---|
| Debto | or 1 | James | R | Lucht | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | | | | | | |
| (Spous | se, if filing) | First Name | Middle Name | Last Name | | |
| Unite | d States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | | | (State) | | |
| (If knov | number vn) | • | | | | |
| | | - 100F/F | | | | Check if this is an amended filing |
| OIII | ciai F | orm 106E/F | | | | |
| Sc | hedu | ıle E/F: Cre | editors Who | Have Unsec | cured Claims | 12/1: |
| other Form claims the en knowr | party to a 106A/B) a s that are ntries in th n). | ny executory contracts and on Schedule G: Exe listed in Schedule D: C ne boxes on the left. At | s or unexpired leases that ecutory Contracts and Uni- Creditors Who Hold Claims tach the Continuation Pa | t could result in a claim. A expired Leases (Official Fo s Secured by Property. If r | Also list executory contracts orm 106G). Do not include an nore space is needed, copy t | n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured he Part you need, fill it out, number rite your name and case number (if |
| Part | 1: List A | All of Your PRIORIT | Y Unsecured Claims | | | |
| 1. | Do any cr | editors have priority ur | nsecured claims against y | rou? | | |
| | ✓ No. G | Go to Part 2. | | | | |
| | Yes. | | | | | |
| | listed, iden As much a | itify what type of claim it as possible, list the claims | is. If a claim has both priori s in alphabetical order accor | ty and nonpriority amounts, | list that claim here and show b | arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the |

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** <u>AAR</u>P 4.1 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 30607 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 84130 Salt Lake City Utah City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Notice Only Is the claim subject to offset? Yes **AMEX** 4.2 \$5,423.00 Last 4 digits of account number Nonpriority Creditor's Name 5/2001 When was the debt incurred? PO box 981540 Number As of the date you file, the claim is: Check all that apply. Contingent El Paso Texas 79998 Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes Athletic & Therapeautic Inst. \$127.70 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 371863 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 15250 Pittsburgh Pennsylvania City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Medical Is the claim subject to offset? **✓** No Yes

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Lucht Last Name Case number (if known) Debtor 1 James First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2:

| | After listing any entries on this page, number them beginning with | h 4.5, followed by 4.6, and so forth. | Total claim |
|-----|--|---|-------------|
| 4.4 | BARCLAYS BANK DELAWARE | Last 4 digits of account number | \$925.00 |
| | Nonpriority Creditor's Name 698 1/2 South Ogden Street | When was the debt incurred? 5/2006 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Buffalo New York 14206 | Unliquidated | |
| | City State Zip Code | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | | |
| | Yes | | |
| 4.5 | Barnes&Noble Card Sellers | Last 4 digits of account number | \$925.94 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | Po Box 60517 Number Street | when was the debt incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | City Industry California 91716 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | <u> </u> | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Credit Card | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | BBY/CBNA | Last 4 digits of account number 8907 | \$1,487.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 6/2010 | |
| | PO BOX 6497 Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | SIOUX FALLS South Dakota 57117 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | | |

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Lucht Case number (if known) Debtor 1 James Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

| 4.7 | CAP1/MNRDS Nonpriority Creditor's Name PO BOX 30253 Number Street SALT LAKE CITY Utah 84130 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? | Last 4 digits of account number | \$1,996.00 |
|-----|--|--|------------|
| 4.8 | ✓ No Yes CAPITAL ONE BANK USA N Nonpriority Creditor's Name | Last 4 digits of account number | \$4,286.00 |
| | PO BOX 85520 Number Street RICHMOND Virginia 23285 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | |
| 4.9 | Captial One Bank (USA) NA Nonpriority Creditor's Name 1680 Capital One Drive Number Street Mc Lean Virginia 22102 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? | When was the debt incurred? | \$2,445.77 |

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R Lucht Debtor 1 James Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$972.60 Last 4 digits of account number Nonpriority Creditor's Name 1103 ALLEN DR When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated MILFORD 45150 Ohio City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Credit Card Is the claim subject to offset? **✓** No Yes 4.11 **CBNA** \$111.00 Last 4 digits of account number _ Nonpriority Creditor's Name 5/1992 PO BOX 1990 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **TEMPE** 85280 Arizona Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ Is the claim subject to offset? **✓** No Yes **CBNA** 4.12 \$27.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 1990 When was the debt incurred? 9/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 85280 TEMPE Arizona Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify __ CreditCard Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CHASE CARD 4.13 \$4,862.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 15298 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON Delaware 19850 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes 4.14 CITGO CONSUMER CARD \$300.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 6401 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 57117 Sioux Falls South Dakota City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Credit Card Other. Specify ___ Is the claim subject to offset? **✓** No Yes **COMENITY BANK/CATHRINS** 4.15 \$1,032.00 Last 4 digits of account number Nonpriority Creditor's Name 4590 E BROAD ST When was the debt incurred? 5/2005 Number As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS 43213 Ohio Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Comenity Bank/Woman Within 4.16 \$76.49 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 182789 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated <u>COLUMB</u>US 43218 Ohio City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Credit Card Is the claim subject to offset? **✓** No Yes COMENITYBANK/MEIJER \$2,740.03 4.17 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 182789 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated COLUMBUS Ohio 43218 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Credit Card Other. Specify ___ Is the claim subject to offset? **✓** No Yes **EXXMBLCITI** 4.18 \$111.00 Last 4 digits of account number Nonpriority Creditor's Name 5/1992 When was the debt incurred? PO BOX 6003 Number Street As of the date you file, the claim is: Check all that apply. Contingent Hagerstown 21747 Maryland Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Home Depot Credit Services \$57.61 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P O Box 78011 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 85062 Phoenix Arizona City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Credit Card Is the claim subject to offset? **✓** No Yes 4.20 Menards \$1,996.21 Last 4 digits of account number _ Nonpriority Creditor's Name 5101 Menard Dr, Eau Claire When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Eau Claire Wisconsin 54703 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Credit Card Other. Specify ___ Is the claim subject to offset? **✓** No Yes North Shore Gas 4.21 \$70.08 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 E Randolph St. n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Utility Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 PayPal Credit \$2,230.84 Last 4 digits of account number Nonpriority Creditor's Name PO Box 105658 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30348 Atlanta Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Credit Card Is the claim subject to offset? **✓** No Yes Prudential Insurance Company of America \$0.00 4.23 Last 4 digits of account number _ Nonpriority Creditor's Name n/a Po Box 7398 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Philadelphia Pennsylvania 19176 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Notice Only Other. Specify ___ Is the claim subject to offset? **✓** No Yes SYNCB/CARE CREDIT 4.24 \$88.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11/2013 950 FORRER BLVD Number Street As of the date you file, the claim is: Check all that apply. Contingent **KETTERING** Ohio 45420 Unliquidated Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 \$339.00 Last 4 digits of account number Nonpriority Creditor's Name 102 2ND & 9TH AVENUE When was the debt incurred? 6/2001 Number Street As of the date you file, the claim is: Check all that apply. Contingent TROY New York 12180 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes 4.26 SYNCB/OLD NAVY \$3,207.23 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ORLANDO 32896 Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Credit Card Other. Specify ___ Is the claim subject to offset? **✓** No Yes SYNCB/SAMS CLUB DC 4.27 \$4,083.00 Last 4 digits of account number Nonpriority Creditor's Name 3/2011 PO BOX 965005 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO 32896 Florida Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify __ CreditCard Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/WALMART DC 4.28 \$1,074.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965024 When was the debt incurred? 2/2016 As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? Yes 4.29 Synchrony Bank/QVC \$69.99 Last 4 digits of account number Nonpriority Creditor's Name 950 Forrer Blvd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 45420 Ohio Dayton City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Credit Card Other. Specify ___ Is the claim subject to offset? **✓** No Yes TD BANK USA/TARGETCRED 4.30 \$2,452.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 673 When was the debt incurred? __1/2008 Number As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS 55440 Minnesota Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No

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R Lucht Debtor 1 James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 United Hospital System, Inc. \$3,094.50 Last 4 digits of account number Nonpriority Creditor's Name 6308 8th Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 53143 Kenosha Wisconsin City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Medical Is the claim subject to offset? **✓** No Yes **VERIZON** 4.32 \$128.06 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 500 TECHNOLOGY DR STE 30 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WELDON SPRING Missouri 63304 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Utility Is the claim subject to offset? **✓** No

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Debtor 1 James R Lucht Case number (if known)
First Name Middle Name Last Name

| from Part 1 |
|--|
| Total the amounts of certain types of unsecured claims. This information is for statistical reporting pur Add the amounts for each type of unsecured claim. Total claims Total claims 6a. Domestic support obligations. 6a. \$0.00 |
| Total claims 6a. Domestic support obligations. 6a. \$0.00 from Part 1 |
| from Part 1 |
| |
| 6b. Taxes and certain other debts you owe the government 6b. \$0.00 |
| 6c. Claims for death or personal injury while you were intoxicated \$0.00 |
| 6d. Other. Add all other priority unsecured claims. Write that 6d. |
| amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. |
| be. Total. Add lines ba through bd. |
| Total claims |
| Total claims from Part 2 6f. Student loans 6f. \$0.00 |
| 6g. Obligations arising out of a separation agreement or 6g. \$0.00 divorce that you did not report as priority claims |
| 6h. Debts to pension or profit-sharing plans, and other similar 6h. |
| 6i. Other. Add all other nonpriority unsecured claims. Write 6i. |
| that amount here. |

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| Fill in this information to identify your case: | | | | |
|---|---------------------------|-------------|------------------------------|---|
| Debtor 1 | James | R | Lucht | _ |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | _ |
| Case number (If known) | | | () | _ |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | Do | cument Page | 37 of 74 |
|--------------------------------|--|---|-----------------------------|--|
| Fill in this in | formation to identify your | case: | | |
| Debtor 1 | James | R | Lucht | |
| Dahara | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing | First Name | Middle Name | Last Name | |
| United State | s Bankruptcy Court for the | : Northern | District of Illinois | |
| Case numb | er | | (State) | |
| (If known) | | | | |
| | | | | Check if this is an amended filing |
| Officia | l Form 106H | | | |
| Schod | ule H: Your Co | dobtors | | 12/15 |
| | | | | complete and accurate as possible. If two married people are |
| 1. Do y | No Yes in the last 8 years, have y | If you are filing a joint case, of you lived in a community produced in a community produced in the community produced in | roperty state or territory | (Community property states and territories include Arizona, |
| 범 | | rmer spouse, or legal equiv | valent live with you at the | time? |
| | ✓ No | | • | |
| | Yes. In which comm | unity state or territory did y | ou live? | Fill in the name and current address of that person. |
| | Name of your spouse, | former spouse, or legal equi | valent | |
| | Number Street | | | |
| | City | State | Zip Cod | le e |
| agai | n as a codebtor only if the | at person is a guarantor or | cosigner. Make sure yo | r if your spouse is filing with you. List the person shown in line 2 u have listed the creditor on Schedule D (Official Form 106D), chedule D, Schedule E/F, or Schedule G to fill out Column 2. |
| Colu | mn 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |

Check all schedules that apply: Lucht, Marcy Schedule D, line 2.1; 2.2 ✓ Name Schedule E/F, line_____ 1107 Cardinal Dr Number Street Schedule G, line Zion City 60099 Illinois Zip Code State

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| | | D0 | cument 1 c | igc 30 01 7. | • | | |
|---|---|--|------------------------------|--------------------|------------|--|--------------------|
| Fill in this in | nformation to identify | your case: | | | | | |
| Debtor 1 | James | R | Lucht | | | | |
| | First Name | Middle Name | Last Name | | Che | eck if this is: | |
| Debtor 2 (Spouse, if filing | ng) First Name | Middle Name | Last Name | | | An amended filing | |
| | | | | | | A supplement showing post- | oetition chapter 1 |
| United State the: | s Bankruptcy Court for | Northern | District of Illinois (State) | | | expenses as of the following | |
| Case number | er | | (0.0.10) | | , | | |
| (If known) | | | | | | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | ıle I: Your In | come | | | | | 12/1 |
| information spouse. If m number (if k | about your spouse. I | If you are separated an I, attach a separate she y question. | d your spouse is ı | not filing with | ou, do | r spouse is living with yo not include information a ional pages, write your n | about your |
| | | | Debtor 1 | | | Debtor 2 | |
| informat | our employment tion. | | | | | | |
| If you ha | ave more than one job, | Employment status | Employed | | | ✓ Employed | |
| attach a | separate page with ion about additional | | ✓ Not Employe | ed | | Not Employed | |
| employe | | Occupation | | | | Accounts Payable | |
| • | oart time, seasonal, or | Employer's name | | | | Classic Toyota | |
| self-emp | loyed work. | Employer's address | | | | 515 North Greenbay Rd | |
| • | ion may include student maker, if it applies. | | Number Street | | | Number Street | |
| | | | | | | | |
| | | | | | | | 60085 |
| | | | City | State Zi | Code | - City State | Zip Code |
| | | How long employed there? | | | | 19 years | |
| Part 2: G | ive Details About N | Monthly Income | | | | | |
| Fait 2. G | ive Details About it | Monthly income | | | | | |
| | nonthly income as of tess you are separated. | the date you file this forr | n. If you have nothir | ng to report for a | ny line, v | write \$0 in the space. Include | your non-filing |
| | | | , combine the inform | nation for all emp | loyers fo | or that person on the lines be | low. If you need |
| more space | e, attach a separate she | et to this form. | | For Debtor | 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (before, calculate what the monthly | | | \$0.00 | \$2,513.23 | |
| be. | nons., if not paid monthly | , occounate what the monthly | wage would | | | | |
| 3. Estima | ate and list monthly ove | rtime pay. | 3. | + | \$0.00 | + \$0.00 | |

4. Calculate gross income. Add line 2 + line 3.

\$0.00

\$2,513.23

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| Debtor 1James First Name | | Lucht Last Name | Case number | | |
|--|--|---------------------|-----------------------|-----------------------------------|-------------------------|
| riiotriame | made rane | Luot Humo | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | | → 4. | \$0.00 | \$2,513.23 | |
| 5. List all payroll deductio | | | | | |
| 5a. Tax, Medicare, and | Social Security deductions | 5a. | \$0.00 | \$574.97 | |
| 5b. Mandatory contribu | itions for retirement plans | 5b. | \$0.00 | \$0.00 | |
| 5c. Voluntary contribut | ions for retirement plans | 5c. | \$0.00 | \$100.53 | |
| 5d. Required repaymen | its of retirement fund loans | 5d. | \$0.00 | \$0.00 | |
| 5e. Insurance | | 5e. | \$0.00 | \$0.00 | |
| 5f. Domestic support of | bligations | 5f. | \$0.00 | \$0.00 | |
| 5g. Union dues | | 5g. | \$0.00 | \$0.00 | |
| 5h. Other deductions. S | Specify: dental and vision | 5h. + | \$0.00 + | \$11.09 | |
| | ons. Add lines 5a + 5b + 5c + 5d + 5e +5 | f + 5g 6. | \$0.00 | \$686.59 | |
| | take-home pay. Subtract line 6 from line | e 4. 7. | \$0.00 | \$1,826.63 | |
| 8. List all other income re | gularly received: | | | | |
| business, profession | • | | | | |
| | r each property and business showing ary and necessary business expenses, and income. | 8a. | \$0.00 | \$0.00 | |
| 8b. Interest and divider | | 8b. | \$0.00 | \$0.00 | |
| 8c. Family support pays dependent regularly | ments that you, a non-filing spouse, or | a | <u> </u> | · | |
| Include alimony, spo | usal support, child support, maintenance, nd property settlement. | 8c. | \$0.00 | \$0.00 | |
| 8d. Unemployment con | npensation | 8d. | \$0.00 | \$0.00 | |
| 8e. Social Security | | 8e. | \$0.00 | \$0.00 | |
| Include cash assistancash assistance that y | essistance that you regularly receive ce and the value (if known) of any non- you receive, such as food stamps (benefits tal Nutrition Assistance Program) or | 8f | \$0.0 <u>0</u> | <u>\$0.00</u> | |
| 8g. Pension or retireme | ent income | 8g. | \$4,745.70 | \$0.00 | |
| 8h. Other monthly inco | me. Specify: | 8h. + | \$0.00 + | \$0.00 | |
| 9. Add all other income Ad | dd lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9. | \$4,745.70 | \$0.00 | |
| 10. Calculate monthly inco Add the entries in line 10 | me. Add line 7 + line 9. for Debtor 1 and Debtor 2 or non-filing sp | 10. couse | \$4,745.70 + | \$1,826.63 | \$6,572.33 |
| Include contributions from friends or relatives. | contributions to the expenses that you m an unmarried partner, members of your unts already included in lines 2-10 or amo | household, your d | ependents, your roomn | , | |
| Specify: | | | | 1 | 1. + \$0.00 |
| | last column of line 10 to the amount i Summary of Schedules and Statistical Su | | | | 2. \$6,572.33 |
| | | | | | Combined monthly income |
| No. | ease or decrease within the year after | you file this form? | | | - |
| Yes. Explain: | | | | | |

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| | | Docu | ıment Page 40 of 74 | 1 | |
|---------------------------------|-------------------------------------|---|---|----------------------|--|
| Fill in this infor | mation to identif | y your case: | | | |
| Debtor 1 | James First Name | R Middle Name | Lucht | | |
| Debtor 2 | riist name | wilddie Name | Last Name | Check if this is: | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | |
| | Bankruptcy Court | for the: Northern | District of Illinois (State) | | nowing post-petition chapter 13 he following date: |
| Case number (If known) | | | | MM / DD / YYYY | , |
| Official | Form 10 |)6J | | | |
| Schedul | e J: Your | Expenses | | | 12/15 |
| information. If (if known). Ans | | | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. D | oes Debtor 2 liv | e in a separate household? | | | |
| | No | | | | |
| | Yes. Debtor 2 | must file Official Forms 106J-2, Exper | nses for Separate Household of Deb | tor 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | | Relative | 9 years | No. ✓ Yes. |
| | | | Relative | 8 months | No. |
| | | | Child | 28 years | No. Yes. |
| | penses include f people other | ✓ No | | | |
| yourself and dependents | - | Yes | | | |
| Part 2: Esti | mate Your On | going Monthly Expenses | | | |
| | | your bankruptcy filing date unless | ou are using this form as a sunnl | ement in a Chanter 1 | 3 case to report |
| | of a date after th | ne bankruptcy is filed. If this is a sup | | | |
| | • | ch non-cash government assistance cluded it on Schedule I: Your Income | • | | Your expenses |
| | or home owner or the ground or l | rship expenses for your residence. Ir ot. 4. | nclude first mortgage payments and | | \$1,438.00 |
| If not incl | uded in line 4: | | | | |

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

\$0.00

\$125.00

4a

4b.

4c.

4d.

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Debtor 1 James R Lucht Case number (if known)
First Name Middle Name Last Name

| FIIST Name IVIII | Jule Name Last Name | | |
|--|---|-----|---------------|
| | | | Your expenses |
| 5. Additional mortgage payments for your | residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$430.00 |
| 6b. Water, sewer, garbage collection | | 6b. | \$75.00 |
| 6c. Telephone, cell phone, Internet, satellit | e, and cable services | 6c. | \$390.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supplies | | 7. | \$1,250.00 |
| 8. Childcare and children's education cos | ts | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | | 9. | \$250.00 |
| 10. Personal care products and services | | 10. | \$250.00 |
| 11. Medical and dental expenses | | 11. | \$250.00 |
| 12. Transportation. Include gas, maintenand Do not include car payments | ce, bus or train fare. | 12. | \$625.00 |
| 13. Entertainment, clubs, recreation, new | spapers, magazines, and books | 13. | \$125.00 |
| 14. Charitable contributions and religious | donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted from y | our pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$40.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$132.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from | m your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payments: | | 10 | |
| 17a. Car payments for Vehicle 1 | | 17a | \$298.00 |
| 17b. Car payments for Vehicle 2 | | 17b | \$308.00 |
| 17c. Other. Specify: Non Filing Spouse (| Credit Card Payments | 17c | \$450.00 |
| 17d. Other. Specify: Pet Expenses | | 17d | \$125.00 |
| 18. Your payments of alimony, maintenan | ce, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your In | come (Official Form 106I). | 18. | - |
| 19.Other payments you make to support o | thers who do not live with you. | | |
| Specify: | | 19. | \$0.00 |
| , , , , | ded in lines 4 or 5 of this form or on Schedule I: Your Income. | | *** |
| 20a. Mortgages on other property 20b. Real estate taxes. | | 20a | \$0.00 |
| | neuranco | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's in | | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep exp | | 20d | \$0.00 |
| 20e. Homeowner's association or condon | illiluiti dues | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Fill in this infor | rmation to identify your ca | ase: | | |
|---------------------|-----------------------------|-------------|------------------------------|--|
| Debtor 1 | James | R | Lucht | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number | | | (, | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and |
| | that they are true and correct. | |
| × | /s/ James Lucht | * |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 3/22/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in this in | nformation to identify your | case: | | | | | |
|--------------------------------|--|------------------------|----------------------------|----------------|----------------------|--------------------|----------------------------|
| Debtor 1 | James First Name | R Middle Nar | Lucht ne Last Nam | е | - | | |
| Debtor 2 (Spouse, if filing | g) First Name | Middle Nar | ne Last Nam | е | - | | |
| United State | es Bankruptcy Court for the: | Northern | District of Illino | | | | |
| Case numb | er | | (Stat | e) | _ | | |
| , , | | | | | | | Check if this is a |
| Officia | al Form 107 | | | | | | amended filing |
| Statem | ent of Financia | al Affairs fo | r Individuals | Filing fo | r Bankru | ptcy | 12/1 |
| information | plete and accurate as po n. If more space is need known). Answer every o | ed, attach a separa | | | | | |
| | ive Details About Your | | nd Where You Lived | Before | | | |
| 1. What | is your current marital st | atus? | | | | | |
| r | Married | | | | | | |
| ▼ 1 | Not married | | | | | | |
| 2. Durin | ng the last 3 years, have y | ou lived anywhere o | ther than where you liv | ve now? | | | |
| 1 | No | | | | | | |
| | Yes. List all of the places y | ou lived in the last 3 | years. Do not include v | vhere you live | now. | | |
| ı | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | Same a | as Debtor 1 | | Same as Debtor 1 |
| Ī | Number Street | | From | Number Str | reet | | From |
| _ | | | То | | | | To |
| <u>,</u> | City State | Zio Codo | | City | Ctata | Zin Codo | |
| _ | City State | Zip Code | | City Same a | State as Debtor 1 | Zip Code | Same as Debtor 1 |
| | | | | | | | |
| ī | Number Street | | From | Number Str | reet | | From |
| - | | | То | | | | To |
| Ī | City State | Zip Code | | City | State | Zip Code | |
| 2 \A/;+h: | the last 8 years did year | wor live with a case | so or logal aguivalant | in a community | ty property of at | o or torritory? (C | ammunity property etates |
| | the last 8 years, did you e ritories include Arizona, Calif | | | | | | |
| ✓ No | 0 | | | | | | |
| ☐ Ye | es. Make sure you fill out S | schedule H: Your Co | debtors (Official Form | 106H). | | | |

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| Deb | tor 1 | James R | Lucht | | umber (if known) | |
|------|-------------------------|--|--|---|--|--|
| | | 1 | e Name Last Nam | е | | |
| Part | 2: | Explain the Sources of Your Inc | come | | | |
| 4. | Filli | I you have any income from employm in the total amount of income you receivities. If you are filing a joint case and you not | ved from all jobs and all busin | esses, including part-time | | rs? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: lanuary 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: lanuary 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | |
| | Inclu publ filing | you receive any other income during ude income regardless of whether that in lic benefit payments; pensions; rental in g a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples of come; interest; dividends; mo you received together, list it o | f other income are alimony; oney collected from lawsuits; only once under Debtor 1. | royalties; and gambling and lot | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | rom January 1 of current year until he date you filed for bankruptcy: | Milwaukee ERS Pension | \$14,238.00 | | |
| | | For last calendar year: January 1 to December 31, 2016) YYYY | Milwaukee ERS Pension | \$57,156.00 | | |
| | | For the calendar year before that: January 1 to December 31, 2015) YYYYY | Milwaukee ERS Pension | \$54,756.00 | | |
| | | | | | | |

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Lucht Debtor 1 James __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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| nsider? | or 1 <u>Jame</u> | es | R | Lucht | Case number (if | known) |
|---|---------------------------------------|---|---|--|--|---|
| nsider's include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing sigent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment paid Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an sider? | First N | Name | Middle Name | Last Name | | |
| Yes. List all payments to an insider. Dates of payment Total amount paid Still owe Reason for this payment | nsiders in corporatio gent, inc | nclude your relatives; any ge ons of which you are an offi cluding one for a business y | eneral partners; relatives of ar icer, director, person in contr | ny general partners; partr ol, or owner of 20% or | nerships of which yo more of their voting | ou are a general partner; securities; and any managing |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited arnsider? | _ | List all a sussaints to surface | -: | | | |
| Number Street City State Zip Code Insider's Name Number Street City State Zip Code Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited arnsider? | res. | . List all payments to an in | Dates of | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited arnsider? | Inside | ler's Name | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited arnsider? | Numb | ber Street | <u> </u> | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited arnsider? | City | State Z | Zip Code | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited arnsider? | Inside | ler's Name | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited ar nsider? | Numb | ber Street | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited ar insider? Include payments on debts guaranteed or cosigned by an insider. | City | State 2 | Zip Code | | | |
| ✓ No ✓ Yes. List all payments that benefited an insider. Dates of payment paid Total amount still owe Reason for this payment still owe Include creditor's name | insider? Include pa | payments on debts guarante | ed or cosigned by an insider nefited an insider. Dates of | Total amount | Amount you | Reason for this payment |
| Insider's Name | Inside | ler's Name | | _ | | |
| Number Street | Numb | ber Street | | | | |
| City State Zip Code | City | State Z | Zip Code | | | |
| Insider's Name | Inside | ler's Name | | | | |
| Number Street | Numb | ber Street | | | | |
| City State Zip Code | City | State 7 | 7in Code | | | |

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Lucht

Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Debtor 1 James

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| | tor 1 | James | R | Lucht | Case number (if known) | | |
|------|----------|--|--|---------------------------------|-------------------------------|--------------------------------|--------------------|
| | | First Name | Middle Name | Last Name | | | |
| 11. | | thin 90 days before you filed counts or refuse to make a p | | | ank or financial institution, | set off any amoui | nts from your |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | ' | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | | | | | | |
| | | Number Street | | Last A. distraction of account. | | | |
| | | | | Last 4 digits of account n | umber: XXXX- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you filed fo pointed receiver, a custodian | | | ossession of an assignee fo | r the benefit of c | reditors, a court- |
| | V | No Yes | | | | | |
| | Ш | | | | | | |
| Part | 5: | List Certain Gifts and Co | ontributions | | | | |
| 13. | Wi | ithin 2 years before you filed | l for bankruptcy, did y | ou give any gifts with a to | tal value of more than \$600 | per person? | |
| | | = ,00.0 00.0.0 ,000 | | | | | |
| | ✓ | T No. | | | | | |
| | ∠ | T No. | | | | | |
| | | No | ach gift. | Describe the gifts | | Dates you gave the gifts | Value |
| | | No Yes. Fill in the details for e | ach gift. | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e | ach gift. more than \$600 | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e Gifts with a total value of a per person | ach gift. more than \$600 | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e Gifts with a total value of per person Person to Whom You Gave to Number Street | ach gift. more than \$600 | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e Gifts with a total value of per person Person to Whom You Gave to Number Street | ach gift. more than \$600 the Gift | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e Gifts with a total value of per person Person to Whom You Gave to Number Street City State | ach gift. more than \$600 the Gift | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e Gifts with a total value of per person Person to Whom You Gave to Number Street City State | ach gift. more than \$600 the Gift Zip Code | | | Dates you gave the | Value |
| | | No Yes. Fill in the details for e Gifts with a total value of per person Person to Whom You Gave to Number Street City State Person's relationship to you | ach gift. more than \$600 the Gift Zip Code | | | Dates you gave the | Value |
| | | Person to Whom You Gave to Person to Whom You Gave to Person 's relationship to you Person to Whom You Gave to Person | ach gift. more than \$600 the Gift Zip Code | | | Dates you gave the | Value |

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| ebtor 1 | James | R | Lucht | Case number (if know | wn) | |
|----------|---|--------------------------|---|---------------------------|--------------------|-------------------|
| | First Name | Middle Name | Last Name | | • | |
| | | | | | | |
| . Wit | hin 2 years before you t | filed for bankruptcy, d | id you give any gifts or contrib | utions with a total value | of more than \$600 | to any charity? |
| | No | | | | | |
| ✓ | | | | | | |
| | Yes. Fill in the details for | or each gift or contribu | ition. | | | |
| | Gifts or contributions | to charities | Describe what you cont | ributed | Date you | Value |
| | that total more than \$ | 6600 | - | | contributed | |
| | | | | | | |
| | Charity's Name | | _ | | | |
| | Chanty 5 Name | | | | | |
| | | | - | | | |
| | No combined Observed | | <u> </u> | | | |
| | Number Street | | | | | |
| | City Stat | e Zip Code | - | | | |
| | Oity Otal | c zip oodc | | | | |
| rt 6· | List Certain Losses | | | | | |
| | | | | | | |
| | No Yes. Fill in the details. Describe the property | | Describe any insurance | | Date of your | Value of property |
| | how the loss occurred | I | Include the amount that in pending insurance claims A/B: Property. | | loss | lost |
| | | | A.B. Troperty. | | | |
| | | | | | | - |
| 7. | List Certain Paymer | sto or Transfero | | | | |
| | No | | or credit counseling agencies fo | , , | | |
| ✓ | Yes. Fill in the details. | | | | | |
| | | | Description and value of | f any property | Date payment | Amount of |
| | | | transferred | | or transfer | payment |
| | | | | | was made | |
| | Semrad Law Firm | | Attorney's Fee - 0.00 | | 3/22/2017 | \$0.00 |
| | Person Who Was Paid | | | | | |
| | 5101 Washington Stree | T | _ | | | |
| | Number Street | | | | | |
| | Unit 29 | | _ | | | |
| | Gurnee Illino | ois 60031 | | | | |
| | City Stat | | _ | | | |
| | | | _ | | | |
| | Email or website addres | S | _ | | | |
| | None | | _ | | | |
| | Person Who Made the F | Payment, if Not You | | | | |
| | | | | | | |
| | Person Who Was Paid | | | | | |
| | | | _ | | | |
| | | | | | | |
| | Number Street | | _ | | | |
| | Number Street | | _ | | | |
| | Number Street | | _ _ _ | | | |
| | Number Street City Stat | e Zip Code | _ _ _ | | | |
| | City Stat | | _ _ _ | | | |
| | | | _ _ _ _ | | | |
| | City Stat | s | | | | |

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| Deb | tor 1 | James | R | Lucht | Case no | umber <i>(if known)</i> | | | |
|-----|--------------------|---|---|---|----------|---------------------------------------|--|---------|------------------------------|
| | | First Name | Middle Name | Last Name | | | | | |
| 17. | hel Do | hin 1 year before you filed for pyou deal with your crediton not include any payment or tra | rs or to make payme | | ehalf pa | ay or transfer | any property to a | nyone v | who promised to |
| | | Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of any programmed | roperty | | Date payment or transfer was made | Amou | unt of payment |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State | Zip Code | | | | | | |
| 18. | the Incl | ordinary course of your business | iness or financial aff d transfers made as se | curity (such as the granting of a sec | | | | | |
| | \Box | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of any property transferred | | Describe any payments red in exchange | property or ceived or debts p | aid | Date transfer was made |
| | | Person Who Received Transf | er | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| | | Person Who Received Transf | er | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| 19. | ber | hin 10 years before you filed neficiary? ese are often called asset-prote | | you transfer any property to a sel | f-settle | d trust or simi | lar device of whic | ch you | are a |
| | | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of the p | property | transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |

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Lucht Debtor 1 James Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number

City

State

State

Zip Code

City

Zip Code

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Lucht Debtor 1 James _ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | James | | R | L | ucht | Cas | se number <i>(i</i> | f known) | | |
|------|----------|----------------------------|----------------|------------------|--------------|---------------------------------------|----------------------|---------------------|----------------|-----------------|----------------------------------|
| | | First Name | | Middle Name | نا | ast Name | | | | | _ |
| 26. | | e you been a part | y in any judic | ial or administ | rative proce | eeding under | any environmer | ntal law? In | ıclude settler | nents and orde | ers. |
| | | No Yes. Fill in the det | tails. | | | | | | | | |
| | | | | | Court or a | gency | | Nature | of the case | | Status of the case |
| | | Case title | | | | | | | | | |
| | | | | | Court Name | 9 | | | | | Pending |
| | | Case number | | | NumberStre | eet | | | | | On appeal |
| | | | | | City | State | Zip Code | | | | Concluded |
| Part | 11: | Give Details Al | bout Your E | Business or C | onnection | s to Any Bu | siness | | | | |
| 27. | With | nin 4 years before | vou filed for | bankruptcv. di | d vou own a | business or | have any of the | following o | onnections t | o anv business | s? |
| | | - | | | - | | r activity, either f | _ | | , | |
| | | | | | - | | artnership (LLP) | ull-ullie or p | Jait-uirie | | |
| | | A partner in a | | | -, - | , , , , , , , , , , , , , , , , , , , | , , | | | | |
| | | An officer, di | rector, or ma | ınaging executi | ve of a corp | oration | | | | | |
| | | An owner of | at least 5% c | of the voting or | equity secur | rities of a cor | poration | | | | |
| | V | No. None of the a | above applie | s. Go to Part 12 | 2. | | | | | | |
| | Ħ | Yes. Check all that | | | | ow for each b | ousiness. | | | | |
| | ш | | | | | | ure of the busine | ess | Employer I | dentification r | number Do not |
| | | | | | | | | | | | umber or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | | | | | | | | | | |
| | | Number Street | | | Nam | e of account | ant or bookkeep | ner . | Dates busi | ness existed | |
| | | City | State | Zip Code | | c or account | ant or bookkeep | <i>,</i> | From | To | |
| | | • | | • | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the nat | ure of the busine | ess | | dentification n | number Do not number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | | | | | | | | | | |
| | | Number Street | | | Nam | e of account | ant or bookkeep | per | Dates busi | ness existed | |
| | | City | State | Zip Code | | | • | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the nat | ure of the busine | ess | Employer I | dentification r | number Do not |
| | | | | | | | | | | | umber or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | | | | | | | | | | |
| | | Number Street | | | Nam | e of account | ant or bookkeep | ner | Dates busi | ness existed | |
| | | City | State | Zip Code | | o or account | ant or bookkeep | | From | To | |
| | | • | | • | | | | | | ' ` | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 James | R | Lucht | Case number (if known) |
|------|--|---------------------------------|------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | Within 2 years beforeditors, or other No Yes. Fill in the | parties. | you give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | | | Date issued | |
| | | | Date Issueu | |
| | Name | | MM/DD/YYYY | |
| | Number Stre | et | <u> </u> | |
| | City | State Zip Code | <u> </u> | |
| Part | t 12: Sign Below | | | |
| t | true and correct. I u a bankruptcy case c | nderstand that making a false s | statement, concealing prope | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | nature of Debtor 1 | | Signature of Debtor 2 |
| | Dat | e 3/22/2017 | | Date 3/22/2017 |
| [] | No Yes Did you pay or agree | e to pay someone who is not an | | duals Filing for Bankruptcy (Official Form 107)? Pankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice, |
| l l | Yes. Name of per | 3011 | | Declaration and Signature (Official Form 119) |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | James | R | Lucht | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number (If known) | | | () | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: PLANET HOME LENDING, L Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 1107 Cardinal Dr, Zion, IL 60099 | Value: \$120,333,00 Retain the property and [explain]: Surrender the property. Creditor's No. name: KIA MOTORS FINANCE Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. Kia Optium | Value: \$0.00 securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debtor | | R | Lucht | _ Case number (if | · | | | |
|---|--|----------------------|--------------------------|------------------------------|------------------------------------|--|--|--|
| 1 | First Name | Middle Name | Last Name | known) | | | | |
| Part 2: | List Your Unexpired Person | onal Property Leases | | | | | | |
| For any informat | For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | | | | | | | |
| Describe your unexpired personal property leases Will the lease be assumed? | | | | | | | | |
| Less | sor's name: | | | | □ No □ Yes | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | | No Yes | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | | □ No □ Yes | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | | □ No □ Yes | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | | □ No □ Yes | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | | No Yes | | | |
| | cription of leased perty: | | | | | | | |
| Less | sor's name: | | | | □ No □ Yes | | | |
| | cription of leased perty: | | | | | | | |
| Part 3 | Sign Below | | | | | | | |
| Unde | _ | | intention about any prop | erty of my estate tha | at secures a debt and any personal | | | |
| | | | | | | | | |
| * / | s/ James Lucht | | × | | | | | |
| Sig | gnature of Debtor 1 | | Signatur | e of Debtor 2 | | | | |
| Da | ate 3/22/2017 MM/DD/YYYY | | | 22/2017 IM/DD/YYYY | | | | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distri | Ct of Illinois | |
|-------|---|-------------------------------|--|-------------------------------|
| In re | James R Lucht | | Case No. | |
| _ | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| | DISCLOSURE OF (| COMPENSATIO | N OF ATTORNEY F | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one yrendered or to be rendered on behalf or | year before the filing of the | petition in bankruptcy, or agreed to | o be paid to me, for services |
| | For legal services, I have agreed to acc | cept | | \$1,400.00 |
| | Prior to the filing of this statement I h | ave received | | \$0.00 |
| | Balance Due | | | \$1,400.00 |
| 2. | . The source of the compensation paid | to me was: | | - |
| | Debtor | Other (specify) | | |
| 3. | . The source of the compensation paid | to me is: | | |
| | ✓ Debtor | Other (specify) | | |
| 4. | I have not agreed to share the abomembers and associates of my la | | on with any other person unless the | ey are |
| | | firm. A copy of the agreem | ith a other person or persons who a ent, together with a list of the name | |
| 5. | . In return for the above-disclosed fee, a. Analysis of the debtor's financ bankruptcy; | | al service for all aspects of the bank g advice to the debtor in determinin | |
| | b. Preparation and filing of any p | etition, schedules, stateme | ents of affairs and plan which may b | oe required; |
| | c. Representation of the debtor a | at the meeting of creditors a | and confirmation hearing, and any a | adjourned hearings thereof; |
| 6. | . By agreement with the debtor(s), the a | above-disclosed fee does no | ot include the following services: | |
| | | | | |
| | | CERTIFIC | CATION | |
| | certify that the foregoing is a complete tor(s) in this bankruptcy proceedings. | e statement of any agreeme | nt or arrangement for payment to n | me for representation of the |
| | 3/22/2017 | | /s/ Nathan Delman | |
| - | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | - | | Name of law firm | |

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1400.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$31.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

James R Lucht, Jr. Matter Number 510754-001 Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 3/22/17

Client _____

Attorney

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Lucht, James R | Case No. | Case No | | |
|---------------|---|--|-------------------------------------|--|--|
| | Debtor(s) | | | | |
| | | Chapter. | Chapter7 | | |
| | VERIFIC | ATION OF CREDITOR MAT | RIX | | |
| T knowledg | he above named Debtors hereby verify e. | that the attached list of creditors is tru | ue and correct to the best of their | | |
| Date: | 3/22/2017 | /s/ Lucht, James Lucht, James R | R | | |
| | | Signature of Deb | tor | | |

PLANET HOME LENDING, L 321 Research Pkwy #303 Meriden, CT, 06450

KIA MOTORS FINANCE PO BOX 20815 FOUNTAIN VALLEY, CA, 92728

AMEX PO box 981540 El Paso, TX, 79998

CHASE CARD P.O. BOX 15298 WILMINGTON, DE, 19850

CAPITAL ONE BANK USA N PO BOX 85520 RICHMOND, VA, 23285

SYNCB/SAMS CLUB DC PO BOX 965005 ORLANDO, FL, 32896

TD BANK USA/TARGETCRED PO BOX 673 MINNEAPOLIS, MN, 55440

CAP1/MNRDS PO BOX 30253 SALT LAKE CITY, UT, 84130

BBY/CBNA PO BOX 6497 SIOUX FALLS, SD, 57117

SYNCB/WALMART DC PO BOX 965024 ORLANDO, FL, 32896

COMENITY BANK/CATHRINS 4590 E BROAD ST COLUMBUS, OH, 43213 BARCLAYS BANK DELAWARE 698 1/2 South Ogden Street Buffalo, NY, 14206

SYNCB/CITGO 102 2ND & 9TH AVENUE TROY, NY, 12180

EXXMBLCITI PO BOX 6003 Hagerstown, MD, 21747

CBNA Po Box 6497 Sioux Falls, SD, 57117

SYNCB/CARE CREDIT 950 FORRER BLVD KETTERING, OH, 45420

Comenity Bank/Woman Within PO BOX 182789 COLUMBUS, OH, 43218

Synchrony Bank/QVC 950 Forrer Blvd Dayton, OH, 45420

VERIZON 455 Duke Drive Franklin, TN, 37067

Captial One Bank (USA) NA 1680 Capital One Drive Mc Lean, VA, 22102

COMENITYBANK/MEIJER Po Box 182273 Columbus, OH, 43218

SYNCB/OLD NAVY Po Box 530942 Atlanta, GA, 30353 Athletic & Therapeautic Inst. 4947 Paysphere Cir Chicago, IL, 60674

Home Depot Credit Services P O Box 78011 Phoenix, AZ, 85062

United Hospital System, Inc. 6308 8th Ave Kenosha, WI, 53143

North Shore Gas 200 E Randolph St. Chicago, IL, 60601

Barnes&Noble Card Sellers Po Box 60517 City Industry, CA, 91716

PayPal Credit PO Box 105658 Atlanta, GA, 30348

CATHERINES 1103 ALLEN DR MILFORD, OH, 45150

Prudential Insurance Company of America Po Box 7398 Philadelphia, PA, 19176

AARP P.O. Box 30607 Salt Lake City, UT, 84130

Menards 5101 Menard Dr, Eau Claire Eau Claire, WI, 54703

CITGO CONSUMER CARD PO BOX 6401 Sioux Falls, SD, 57117 Case 17-09030 Doc 1 Filed 03/22/17 Entered 03/22/17 11:55:25 Desc Main Document Page 69 of 74

| Debtor 1 James | R Luch | t Case num | hber (if known) | | |
|--|---|---|--|-----------------------------------|--|
| First Name | Middle Name Last I | iame | | | |
| Part 6: Answer These Que | estions for Reporting Purposes | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | |
| 17. Are you filing under | No. I am not filing under Chapte | r 7 Gataline 18 | | | |
| Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under Chapter 7. expenses are paid that fund No. Yes. | Do you estimate that after any eds will be available to distribute to | | ative | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. How much do you estimate your assets to be worth? | ☐ 200-999 ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 mill \$50,000,001-\$100 mill \$100,000,001-\$500 | ### \$1,000,000,001-\$10 be considered as \$1,000,000,001-\$50 be considered as \$50 billion | oillion billion | |
| 20. How much do you estimate your liabilities to be? | ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,000,001-\$10 min \$50,000,001-\$100 m \$100,000,001-\$500 | illion | billion | |
| Part 7: Sign Below | | | | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/James Lucht Signature of Debtor 2 | | | | |
| | Signature of Debtor 1 Executed on 3/22/2017 MM / DD / | | Executed onMM / DD / YYYY | 59 ₆₁₃ 149313425;;;;;; | |

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| Fill in this infor | mation to identify your ca | ise: | | |
|---------------------|--|--|---|---|
| Debtor 1 | James | R | Lucht | |
| O ODICE ! | First Name | Middle Name | Last Name | |
| Debtor 2 | | | Last Norga | |
| (Spouse, it filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number | | | (State) | |
| (If known) | | | | Chapt if this is |
| ~ cc: | E 100D - | _ | | Check if this is a amended filing |
| Official | Form 106De | <u>C</u> | | |
| Declarat | tion About an | Individual Deb | tor's Schedules | 12/1 |
| If two married | people are filing togeth | er, both are equally resp | onsible for supplying correc | et information. |
| money or prop | perty by fraud in connect , 1341, 1519, and 3571. | ile bankruptcy schedule ion with a bankruptcy c | s or amended screedings. M ase can result in fines up to | aking a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18 |
| Did you | pay or agree to pay some | one who is NOT an atto | rney to help you fill out ban | kruptcy forms? Petition Preparer's Notice, Declaration, and |
| Under p | enalty of perjury, I declary are true and correct. | re that I have read the s | Signature (Official F | Form 119). |
| X /s/Jam | es Lucht Van / | 17. H | ~ × | |

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1/2

MM/DD/YYYY

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| Debtor 1 | James | Ŕ | Lucht | Case number (if known) |
|----------|---|--------------------------------|---------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. Wi | thin 2 years before yo editors, or other parti | ou filed for bankruptcy, dies. | d you give a financial stater | nent to anyone about your business? Include all financial institutions, |
| | No Yes, Fill in the detai | ls below. | | |
| _ | 1 | | Date issued | |
| | | | | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12 | Sign Below | | | |
| a b | ankruptcy case can r | esult in fines up to \$250,0 | 00, or imprisonment for up | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | 7s/ 3 Signatur | ames Lucht James () | (0000 04) | Signature of Debtor 2 |
| | Date 3/ | 22/2017 | | Date 3/22/2017 |
| Did | you attach additiona | I pages to Your Statemen | nt of Financial Affairs for Ind | ividuals Filing for Bankruptcy (Official Form 107)? |
| [Z] | No | | | |
| | Yes | | | |
| Did | you pay or agree to p | pay someone who is not a | n attorney to help you fill o | ut bankruptcy forms? |
| V | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| btor James | | R Lucht | | Case number (if | | |
|-----------------------------|--|---|--|--|--|--|
| First Na | me | Middle Name | Last Name | known) | | |
| 2: List You | r Unexpired P | ersonal Property Leas | ses | | | |
| any unexpired | i personal prope v. Do not list rea | erty lease that you listed | in Schedule G: Executory d leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). | | |
| Describe you | r unexpired pers | sonal property leases | | Will the lease be assumed? | | |
| | | | | □ No | | |
| Lessor's name | e: | · · · · · | | Yes | | |
| Description of property: | leased | | | | | |
| | | | | | | |
| Lessor's name | e: | | | □ No □ Yes | | |
| | **** | | | U 168 | | |
| Description of property: | leased | | | | | |
| | | | | | | |
| Lessor's nam | e: | | | No Yes | | |
| | | and the second second second second | | Li tes | | |
| Description of property: | leased | | | | | |
| | | and the second second | The second secon | | | |
| Lessor's nam | e: | | | Yes | | |
| Description of property: | leased | | | | | |
| | e va etere | | | | | |
| Lessor's nam | e: | | | □ No □ Yes | | |
| Description of | tioned | | | | | |
| Description of property: | rieaseo | | | | | |
| | | | | | | |
| Lessor's nam | e: | | | Yes | | |
| December of | Floored | | * | Constitution of the Consti | | |
| Description of property: | rieaseo | | | | | |
| | | | | | | |
| Lessor's nam | e: | | | □ No □ Yes | | |
| n | | and the second second second | | La contra de la contra del la contra del la contra del la contra de la contra del la contra de la contra de la contra del la contra de | | |
| Description or property: | r leased | | | | | |
| t 3: Sign Be | elow | a digentica de la composição de la granda de la composição de la composição de la composição de la composição | a anganggan an ara-ara-ara-ara-ara-ara-ara-ara-ara-ara | | | |
| Under penalty | of perjury, I dec | clare that I have indicate unexpired lease. | d my intention about an | y property of my estate that secures a debt and any personal | | |
| | 0 | al w. | | | | |
| X /s/ Jame: | | mo 15 turm of | 4 * = | anature of Dabter 1 | | |
| Signature o | T Debtor 1 | / | a S | gnature of Debtor 2 | | |
| Date 3/22 | | | D | ate 3/22/2017 | | |
| MM/ | DD/YYYY | | | MM/DD/YYYY | | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Lucht, James R | Case No | |
|-----------------|----------------|---|---|
| | Debtor(s) | | |
| | | Chapter. | Chapter7 |
| | VERIFIC | CATION OF CREDITOR MATI | RIX |
| Ti knowledge | | y that the attached list of creditors is tru | e and correct to the best of their |
| Date: | 3/22/2017 | /s/ Lucht, James Lucht, James R Signature of Debt | 100000000000000000000000000000000000000 |

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| Debtor 1 James | R | Lucht | Case number (i | f known) | |
|--|---|---|--------------------------------|---|-------------------------|
| First Name | Middle Name | Last Name | Column A Debtor 1 | Column B Debtor 2 or non-filing spou | ıse |
| 8. Unemployment compens Do not enter the amount is | f you contend that the amount n | eceived was a benefit | \$0.00 | \$0.00 | |
| under the Social Security A For you | act, mstead, ist it ners. | \$0.00 | | | |
| For your spouse | | \$0.00 | | | |
| benefit under the Social S | | | \$4,763.95 | \$ <u>0.00</u> | |
| amount. Do not include a | sources not listed above. Speci ny benefits received under the Sc ctim of a war crime, a crime again remorism. If necessary, list other sow. | ocial Security Act or est humanity, or | | | |
| · | <u></u> | | | | |
| Total amounts from sepa | rate pages, if any. | | +\$0.00 | + <u>\$0.00</u> | |
| | urrent monthly income. Add lir | nes 2 through 10 for | \$4,763.95 | + \$2,666.35 | <u> </u> |
| each column. Then add the | total for Column A to the total for | r Column B. | | | Total current |
| | | | | | monthly income |
| | ther the Means Test Appli | | | | |
| | monthly income for the year. | | , | Copy line 11 here → | \$7,430.30 |
| | ent monthly income from line 11 | • | | Jopy mie 11 noie - | X 12 |
| | number of months in a year). | | | | |
| 12b. The result is your ar | nual income for this part of the t | om, | | | 126. <u>\$89,163.60</u> |
| 13 Calculate the median f | amily income that applies to y | ou. Follow these steps: | | | |
| Fill in the state in which y | ou live. | Illinois | | | |
| Fill in the number of peop | ole in your household. | 5 | | | |
| Fill in the median family in household. | ncome for your state and size of | | | | 13. \$98,480.00 |
| To find a list of applicable instructions for this form. | e median income amounts, go o . This list may also be available al | nline using the link specif t the bankruptcy clerk's o | lied in the separate ffice. | | |
| 14. How do the lines comp | | | | | |
| 14a. Line 12b is less Go to Part 3. | than or equal to line 13. On the | top of page 1, check bo | x 1. There is no presumpti | on of abuse. | |
| 14b. Line 12b is mo Go to Part 3 ar | re than line 13. On the top of pand fill out Form 122A-2. | ige 1, check box 2, The p | presumption of abuse is de | termined by Form 122/ | 1-2. |
| Part 3: Sign Below | | | | | |
| <u> </u> | | | | | |
| By signing here, I decla | re under penalty of perjury that the | ne information on this sta | atement and in any attachm | ents is true and correct | |
| | A 0.0 1.4 | ^ | _ | | |
| /s/ James Lucht Signature of Debtor | 4 11 2 2 2 | <u> </u> | Signature of Debtor 2 | <u>, , , , , , , , , , , , , , , , , , , </u> | |
| Date 3/22/2017 MM/DD/YYY | 7 | | Date 3/22/2017 MM/DD/YYYY | | |
| If you checked line 1- If you checked line 1 | 4a, do NOT fill out or file Form 1 4b, fill out Form 122A-2 and file | 22A-2. it with this form. | | | |